



California Department of Public Health (CDPH) Infection Prevention Webinar

Wednesday, August 23, 2023

Upcoming Calls



- CDPH Tuesday, 8 a.m., All-Facilities Phone Calls
 - 2nd Tuesday of each month
 - Call in: **1.844.867.6167**
 - Access code: **799 3227**
- CDPH Wednesday, 3 p.m., SNF Infection Prevention (IP) Webinars
 - 4th Wednesday of each month
 - Register at: hsag.com/cdph-ip-webinars
 - Recordings, notes, and slides are posted at registration site
- HSAG Tuesday, 11:30 a.m., National Healthcare Safety Network (NHSN) & HAI Updates & Office Hours:
 - 3rd Tuesday of each month
 - Register at: <https://bit.ly/NHSNHAIofficehoursJulytoDec2023>

Agenda



- Announcements
- National Healthcare Safety Network (NHSN) Updates
- Immunization Branch Updates
- AB 1797: California Immunization Registry Requirement
- Occupational Health Branch Q&A
- Healthcare-Associated Infection (HAI) Updates
- Q&A

Virtual Infection Preventionist Train-the-Trainer Workshops



- 4 Train-the-Trainer Workshops offered over 15 weeks.
- **Goal:** Improve IPC practices to reduce HAIs and infection-related hospitalizations.
- BRN and NHAP continuing education available.
- Trainees are expected to train SNF staff on the IPC practices taught in each workshop.
- Register: <https://www.hsag.com/ip-train-the-trainer>

Register Here



BRN = California Board of Registered Nursing

NHAP = Nursing Home Administrator Program

Enhanced Standard Precautions

May 15–19, 2023

Recording & Toolkits Available Online

Urinary Tract Infection Prevention

June 20–23, 2023

Recording & Toolkits Available Online

Certified Nursing Assistant IPC Curriculum

July 17–21, 2023

Recording & Toolkits Available Online

EVS IPC Curriculum for EVS Managers

August 21–25, 2023

- August 21, 1–2:30 p.m.
- August 22, 11 a.m.–12:30 p.m.
- August 24, 12–1:30 p.m.
- August 25, 2–3:30 p.m.

Environmental Services (EVS)

IPC Curriculum for EVS Staff & Managers

- Module 1: Hand Hygiene
- Module 2: Understanding Disinfectants
- Module 3: EVS Cart Set Up
- Module 4: Cleaning and Disinfection Procedure
- Module 5: Cleaning Policies and Procedures



Register for the final two EVS trainings:

- Thursday, 8/24, 12 noon PT
- Friday, 8/25, 2 p.m. PT

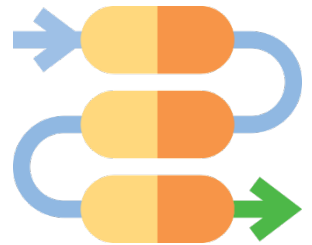
<https://us06web.zoom.us/meeting/register/tZckdOCgqjgvGtKUN3HYxNWGGNe0qUoqozRf#/registration>



Register for EVS Office Hours:

- Friday, 9/1, 11 a.m. PT

<https://us06web.zoom.us/meeting/register/tZEuc-qupzkoGtG71ilH7H8et-NBAkDrJAZG#/registration>





NHSN Updates

Updated NHSN Survival Guide

- Overview of NHSN reporting requirements
- Review key definitions
- Share common mistakes
- Connect users to more in-depth training resources and guidance

NHSN Reporting Description	NHSN Deadline																					
<ul style="list-style-type: none"> • COVID-19 Pathway Data Reporting: Each week, new data should be reported representing the time since the last report date. <ol style="list-style-type: none"> 1. Resident Impact and Facility Capacity 2. Staff and Personnel Impact • COVID-19 Vaccination Data Reporting: Cumulative data should be reported every week for all residents and staff that were in your facility for the week of data collection. <ol style="list-style-type: none"> 1. LTCF Residents 2. LTCF HCP <p>Use the recommended Person-Level Vaccination Reporting Tool to standardize and simplify data monitoring and tracking.</p>	<p>Reporting week is Monday through Sunday. Data must be submitted into NHSN once every reporting week. Report consistently each week.</p> <p>Report once every week before Sunday at 11:59 p.m. (EST).</p> <table border="1" data-bbox="1363 619 1895 862"> <thead> <tr> <th>S</th> <th>M</th> <th>T</th> <th>W</th> <th>Th</th> <th>F</th> <th>S</th> </tr> </thead> <tbody> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>7</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	S	M	T	W	Th	F	S		1	2	3	4	5	6	7						
S	M	T	W	Th	F	S																
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<ul style="list-style-type: none"> • Annual Flu Vaccination Data Reporting for Health Care Personnel: CDC/NHSN encourages that HCP influenza vaccination summary data be updated monthly. However, to meet the minimum data requirements for NHSN participation, CMS only requires one influenza vaccination summary report to be submitted at the conclusion of the measure reporting period (October 1–March 31). 	<p>Reporting period is October 1–March 31. Summary data due by May 15 each year in NHSN Healthcare Personnel Safety (HPS) Component.</p>																					



HAI Updates

COVID-19 Cases are Rising

Update for August 18, 2023

NEW HOSPITAL ADMISSIONS

588,316 total

283 daily avg.

0.9 (per 100k)



June 18 – August 12

DEATHS

103,215 total

9 daily avg.

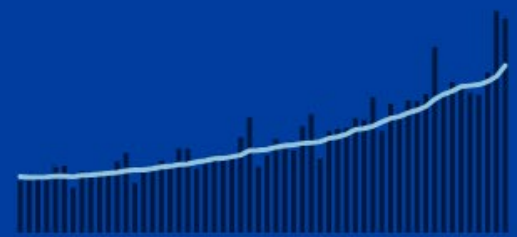
0.02 new deaths (per 100K)



May 30 – July 24

TESTS

11.8% test positivity



June 19 – August 13

Source Control Masking in Healthcare

Underlying Principle:

- Requirements for healthcare personnel (HCP) to wear **masks or respirators for source control** of respiratory viruses in healthcare settings primarily serve to **protect patients/residents**, by preventing HCP from inadvertently infecting patients or residents, especially those who are unable to wear masks to protect themselves or have higher risk of severe illness or death from infection.

Evidence:

- Decreases in healthcare-associated respiratory infections temporally associated with source control masking (Seidelman, et al. ICHE 2022; Woolbert, et al. ICHE 2023)

Local Circumstances to Consider

Facilities should follow any applicable local health department requirement, and consider the following local circumstances when developing plans regarding source control masking for HCP:

- **Vulnerability of patient/resident population** to COVID-19, influenza, and other respiratory infections.
- Ability to maintain **staffing levels** if multiple staff were out sick with COVID-19, influenza, or other respiratory viruses.
- **Local transmission** of respiratory infections.
- The impact of **new viruses, variants, or strains** on existing immune protection.

Implement source control masking in addition to other respiratory infection prevention measures, including immunizations, which remain the most effective strategy in preventing infection, disease, and serious illness and death from COVID-19.

Application of HCP Source Control Masking

- **Patient/resident interaction:** HCP mask during all patient/resident-care encounters, +/- while in any patient/resident care area.
- **Location within the facility and patient/resident populations:** All patient/resident care areas and encounters facilitywide, or limited to areas of the facility housing the highest-risk patients/residents.
- **Temporal:** Year-round, or tie to local transmission of respiratory illness and/or COVID-19 and other respiratory virus (e.g., influenza) circulation or season.
- **Outbreak:** Intensify during a facility outbreak response or elevated levels of patient/resident or HCP respiratory illness; consider upgrading the level of source control and protection from a surgical mask to a fit-tested N95 respirator.

Q: Are visitors required to wear masks as source control while in a nursing home?

- No; however, facilities should consider source control masking policies for visitors based on the same local circumstances as for HCP as listed above, such as community transmission of respiratory viruses, emergent variants, and the number of ill staff.
- In general, visitors should be asked to defer their visit if they have symptoms of a respiratory infection or other communicable disease or have had recent close contact with someone with a COVID-19 infection within the last 10 days.
 - If visitation is essential (e.g., end-of-life), facilities should require that visitors wear a mask if they have respiratory symptoms, an infection, or have had a recent close contact with someone with a COVID-19 infection within the last 10 days.
- For facilities that implement masking policies for visitors, facilities cannot deny visitation if a visitor refuses to mask.
 - offer alternatives such as an outdoor visit in a designated area and/or away from other patients.

Questions?





This material was prepared by Health Services Advisory Group (HSAG), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. CA-12SOW-XC-08232023-01

